

# The Application Process

**In order to apply for rental in Worsham Mobile Home Park, you must complete the following:**

1. Fill out and sign the attached application form
2. Payment for a credit check (required for all applicants).  
Fees are as follows and must be included with the application:  
\$45.00 *cash* for application  
Include ALL of the following items with the application:
  - Last two pay stubs
  - Copy of picture ID for person(s) signing lease (drivers license)
  - Voided personal check or bank statement showing bank account numbers
  - Social Security Card
  - Work Authorization Card or copy of green card if applicable
  - Name, address and telephone number of employer
  - Copy of utility statements in your name (Dominion Power, water bill, etc.)

**Following acceptance for rental in Worsham Mobile Home Park the following items are required:**

1. Damage Waiver/Security Deposit in the amount two months rent is due at the signing of the lease. This amount should be in cash or a money order for this amount only. The Damage Waiver/security deposit will not be refunded if Lessee breaks the lease for any reason.
2. The first month's rent. This amount is based on the following and should be in a separate money order or cash payment:
  - \$465.00** base rent for single wide home
  - \$525.00** base rent for double wide home
  - \$10.00** for each pet not to exceed two pets. No pet shall weigh more than 35 lbs.
3. Picture ID and Social Security number of ever person intending to reside in the home.
4. Copy of title of mobile home and/or purchase agreement.
5. Proof of insurance. Insurance is required on all mobile homes.
6. Copy of alien registration card (green card) and/or work authorization card
7. New home telephone number
8. For new homes in the park: copies of the final inspection, building or occupancy permit, plumbing permit and electrical permit.

**IMPORTANT:**

If you are bringing in a mobile home to the lot you **MUST** fully comply with all requirements of the City of Richmond. Check at City Hall for City requirements. You may not occupy your mobile home until you have attained an occupancy permit.

If you wish to purchase a home already on a lot in Worsham Mobile Home Park you must be approved for tenancy **BEFORE** making a payment to the seller. All mobile homes must be approved for resale if they are to remain in the park. It is imperative that you check with park management to be sure the home may remain in the park **BEFORE** you make a payment to the seller.

# LOT RENTAL APPLICATION

## Worsham Mobile Home Park

Premises: 5349 Hull Street Road Richmond, VA 23224-2425 Tel: 804-230-6145 or 804-232-5538

Mailing Address: 5315 Hull Street Road Richmond, VA 23224

**Please print legibly.** Fill in ALL blanks. All adults must sign below. Please note the documentation needed on previous page. If two adults are to sign the lease, both must be on title or purchase agreement of the home. Co-signers are not released from co-signing unless a new application with updated financial history is provided by the resident and approved by management.

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ US Citizen? \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ US Citizen? \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_ # Additional occupants: (Include DOB of minor children: \_\_\_\_\_)

Are you a US Military Veteran? \_\_\_\_\_

**Pets** (two permitted; must be under 35 pounds):

Type of pet: \_\_\_\_\_, weight: \_\_\_\_\_, age: \_\_\_\_\_, Name: \_\_\_\_\_, Tag #: \_\_\_\_\_

Type of pet: \_\_\_\_\_, weight: \_\_\_\_\_, age: \_\_\_\_\_, Name: \_\_\_\_\_, Tag #: \_\_\_\_\_

### RESIDENCY

Current address: \_\_\_\_\_ City: \_\_\_\_\_ State and zip: \_\_\_\_\_

Tel: \_\_\_\_\_ Landlord: \_\_\_\_\_ Tel: \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_ How long: \_\_\_\_\_

Previous address: \_\_\_\_\_ City: \_\_\_\_\_ State and zip: \_\_\_\_\_

Tel: \_\_\_\_\_ Previous Landlord: \_\_\_\_\_ Tel: \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_ How long: \_\_\_\_\_

email address: \_\_\_\_\_

### MOBILE HOME

Year \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Size: \_\_\_\_\_ Lic# \_\_\_\_\_

# of Bedrooms: \_\_\_\_\_ Heating Fuel: \_\_\_\_\_ Oil \_\_\_\_\_ Gas (No gas logs, fireplaces or wood-burning stoves are permitted)

Insured by: \_\_\_\_\_ Address: \_\_\_\_\_ Tel: \_\_\_\_\_

Owned by: \_\_\_\_\_ Purchased from: \_\_\_\_\_ Tel: \_\_\_\_\_

Financed by: \_\_\_\_\_ Address: \_\_\_\_\_ Tel: \_\_\_\_\_

### VEHICLES *note: all vehicles in this park must be licensed in Virginia and have a current inspection*

Auto Make & Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Lic# \_\_\_\_\_

Auto Make & Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Lic# \_\_\_\_\_

### EMPLOYMENT

Employer \_\_\_\_\_ Position/Rank \_\_\_\_\_ Supervisor \_\_\_\_\_

Tel# \_\_\_\_\_ Monthly Income \_\_\_\_\_ How Long \_\_\_\_\_

Previous Employer \_\_\_\_\_ Position/Rank \_\_\_\_\_ Supervisor \_\_\_\_\_

Tel# \_\_\_\_\_ Monthly Income \_\_\_\_\_ How Long \_\_\_\_\_

### SPOUSE/CO-APPLICANT EMPLOYMENT

Employer \_\_\_\_\_ Position/Rank \_\_\_\_\_ Supervisor \_\_\_\_\_

Tel# \_\_\_\_\_ Monthly Income \_\_\_\_\_ How Long \_\_\_\_\_

Previous Employer \_\_\_\_\_ Position/Rank \_\_\_\_\_ Supervisor \_\_\_\_\_

Tel# \_\_\_\_\_ Monthly Income \_\_\_\_\_ How Long \_\_\_\_\_

**ADDITIONAL SOURCE OF MONTHLY INCOME**

Source: \_\_\_\_\_ Monthly Amount: \$ \_\_\_\_\_

**BANKING/CREDIT/OTHER**

Bank Name (Checking Account): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Checking Acct#: \_\_\_\_\_ **Include a voided check or bank statement with application**

Bank Name (Savings Account): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Savings Acct#: \_\_\_\_\_

**CREDITORS**

Name & Account #	Monthly Payment	Balance owed
1. _____		
2. _____		
3. _____		

**PERSONAL REFERENCES—NOT A RELATIVE**

- \_\_\_\_\_
- \_\_\_\_\_

**Have you or your spouse ever:**

Been evicted or asked to move out?	Y	N
Broken a rental agreement or lease contract?	Y	N
Been sued for non-payment of rent?	Y	N
Been sued for damages to a rental property?	Y	N
Declared bankruptcy?	Y	N
Had any outstanding judgments?	Y	N

If "yes" to any of the above, please explain: \_\_\_\_\_  
\_\_\_\_\_

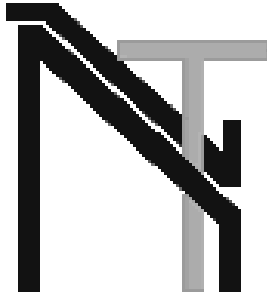
**EMERGENCY CONTACT**

Name \_\_\_\_\_ Address: \_\_\_\_\_ Tel#: \_\_\_\_\_

This application is true and complete and is offered for the purposes of securing mobile home parking space in Worsham Mobile Home Park. Misrepresentation of any material fact shall be cause for cancellation of a Mobile Home Lot Lease Agreement and other remedies set forth therein. I (we) hereby authorize the Lessor or its Agent to check my (our) credit rating and/or references and/or criminal history. I (we) understand the information contained on this form and rental agreement may be maintained in a tenant database for up to six years after I (we) vacate the premise. Worsham Mobile Home Park does not discriminate on the basis of race, religion, sex, age or national origin. If I rent the unit, I understand the information contained on my application, a move-out form, and rental agreement may be maintained in a tenant database for up to six (6) years after I vacate the premises.

_____ Signature of Applicant	_____ Date
_____ Signature of Co-Applicant or Spouse	_____ Date

APPLICATION FEE (Non-refundable) \$ \_\_\_\_\_ Date received: \_\_\_\_\_



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# NATIONAL TENANT NETWORK

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## MOVE-IN FORM 1

<b>Tenant 1</b>	<b>Tenant 2</b>
<i>Last Name</i>	<i>Last Name</i>
<i>First Name</i>	<i>First name</i>
<i>Social Security #</i>	<i>Social Security #</i>
<i>Driver License #</i>	<i>Driver License #</i>

### Address Applied For in Worsham Mobile Home Park:

5347 Hull Street Road Lot # \_\_\_\_\_  
Richmond, VA 23224

Move-in Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Rent Amount: \$ \_\_\_\_\_

*I certify that the above information is correct and complete and hereby authorize you to make any inquires you feel necessary to evaluate my tenancy. If I rent the lot, I understand the information contained on this form and on the move-out form, and my rental agreement may be maintained in a tenant database for up to six (6) years after I vacate the premises.*

<i>Tenant Signature 1</i>	<i>Tenant Signature 2</i>
<i>Current Street Address</i>	<i>Former Street Address</i>
<i>City, State, Zip</i>	<i>City, State, Zip</i>

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MANAGER SIGNATURE

ACCESS # HA-1900

National Tenant Network Post Office Box 7316 \* 2017 Cunningham Drive #106 \* Hampton \* Virginia \* 23666  
FAX 1-877-330-3606